Conclusion: Execution of needle and syringe exchange programs within prisons can play an important role in decreasing the number of prisoners using shared syringes and also number of shared syringes used by each prisoner. Therefore, it can greatly help medical staff with controlling blood-borne diseases.

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57.004

Prevalence of urinary schistosomiasis in Offinso-South Municipality in Ashanti Region-Ghana

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Background: Of the 200 million people infected worldwide, 85% of the burden is concentrated in Africa. Ghana, a sub-Sahara Africa nation has records of Schistosomiasis and other Soil Transmitted Helminthes infection. The pathology of SH infection has known public health effects on reproduction and productivity in affected persons.

Methods: The exploratory survey was undertaken in the Offinso South Municipality, in the Ashanti Region of Ghana West Africa for the period of January 2007 to August 2009 involving 10759 subjects within the ages of 9 to 25 years. The selection of the site was influenced by the presence of river Ofin which has adjoining tributaries that pass through the main town. The observation which was hospital-based looked at results of all diagnostic laboratory requests for samples of out-patients for the stated period. Urine of at least 10 ml was routinely collected. Urine chemistry was measured for all samples using urine test strip and analyzer by RocheTM following all standard procedures. Schistosoma haematobium (SH) ova identification and quantification was done at low power magnification (x10 objective). Quantification of SH ova was done using the routine diagnostic plus (+) system.

Results: 1.69% of the samples were positive for SH ova. The intensity of ova seen on each positive slide corresponded to the level of hematuria reported per urine appearance and proteinuria. The concentrations of leucocytes recorded were normal and did not suggest any parasitic infection.

Conclusion: A prevalence of 1.69% is low when compared with values from other studies. Hunter et al, 2003, saw prevalence from 17% to 51% in a farming community that lived by a Dam in Upper East Region of Ghana. The adequate treatment schedule realized from the hospital could also contribute to the probable reduce transmission rate of SH infection. It also shows probable reduced risk associated with water-contact pattern in its infection. Even though urinary schistosomiasis infection is not a public health concern at this moment in the municipality, proper surveillance and effective intervention should be in place to eradicate the infection in the municipality and other parts of the country.

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Influenza-like illness among US pilgrims returning from the Hajj in the Kingdom of Saudi Arabia compared to other US-bound Travelers: Data from the CDC quarantine activity reporting system (QARS), 2006-2008

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Background: Every year,approximately two million Muslim pilgrims(Hajjis) from almost 140 countries gather in the Kingdom of Saudi Arabia(KSA) for 2-3 weeks to perform Hajj religious rites in a limited geographic area. Crowded conditions have historically played a role in the transmission of infectious diseases among Hajjis. Influenza-like illness(ILI) was defined as fever $\geq$100 °F with cough and/or sore throat, in the absence of a known cause other than influenza. The objective of this study was to describe the occurrence of ILI among Hajjis returning to the United states from KSA.

Methods: Data for all ill Hajjis traveling from KSA to the United States reported into QARS during three consecutive annual Hajj seasons were analyzed to identify the relative risk(RR) of reported ILI among Hajjis versus other US-bound travelers during January 2006,2007 and 2008. US Bureau of Transportation Statistics data were used to identify the number of direct US-bound travelers from KSA and countries with ILI cases reported in the QARS during each year. The numbers of US-bound travelers from both the Middle East countries and other countries reporting ILI cases in QARS were used as denominators to calculate the incidence of ILI among returning US Hajjis versus its incidence among US-bound travelers returning from other countries. The RR was then calculated.

Results: The RR of having ILI was significantly higher among US-bound Hajjis than other US-bound travelers in January 2006(RR = 9.73, $P = 0.006$) but was insignificantly higher in January 2008(RR = 2.62, $P = 0.2$). No ILI case was reported among hajjis in January 2007 compared to 11 cases reported among travelers from other countries.

Conclusion: A potential reporting bias of ILI among hajjis versus other travelers may represent a limitation to the study results. However, travelers to mass gatherings such as the Hajj may be at significant risk of acquiring ILI. QARS data could permit early detection of infectious diseases among US-bound travelers. QARS data can also be a useful adjunct to other surveillance systems to determine the need for enhanced health surveillance at the US ports of entry for travelers returning from mass gatherings.

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